



Docket No.: CALTE.004CP1

Customer No.: 20,995

**AMENDMENT / RESPONSE TRANSMITTAL**

Applicant : Anderson, et al.  
App. No. : 09/849,869  
Filed : May 4, 2001  
For : PAIN SIGNALING  
MOLECULES  
Examiner : Ulm, John D.  
Art Unit : 1646

**CERTIFICATE OF MAILING**

I hereby certify that this correspondence and all marked attachments are being deposited with the United States Postal Service as first-class mail in an envelope addressed to: Commissioner for Patents, P.O. Box 1450, Alexandria, VA 22313-1450, on

July 12, 2004

(Date)

Michael L. Fuller, Reg. No. 36,516

Commissioner for Patents  
P.O. Box 1450  
Alexandria, VA 22313-1450

Sir:

Transmitted herewith for filing in the above-identified application are the following enclosures:

- (X) Amendment and Response in 11 pages.
- (X) Declaration by inventor David J. Anderson in 3 pages.
- (X) An Information Disclosure Statement in 1 page.
- (X) PTO Form 1449 listing 3 references all of which are enclosed.

The fee has been calculated as shown below:

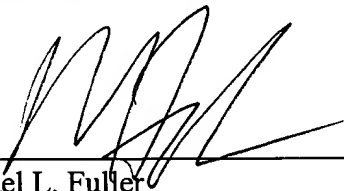
FEE CALCULATION				
FEE TYPE		FEE CODE	CALCULATION	TOTAL
Total Claims	30 - 101 = 0	1202 (\$18)	0 x 18 =	\$0
Independent Claims	5 - 20 = 0	1201 (\$86)	0 x 86 =	\$0
Multiple Claim		1203 (\$290)		\$0
1 Month Extension		1251 (\$110)		\$0
2 Month Extension		1252 (\$420)		\$0
3 Month Extension		1253 (\$950)		\$950
			<b>TOTAL FEE DUE</b>	<b>\$950</b>

07/16/2004 MBELETE1 00000032 09849869

01 FC:1253

950.00 DP

- (X) An extension of time is hereby requested by payment of the appropriate fee indicated above.
- (X) A check in the amount of \$950 is enclosed.
- (X) Return prepaid postcard.
- (X) Please charge any additional fees, including any fees for additional extension of time, or credit overpayment to Deposit Account No. 11-1410.



---

Michael L. Fuller  
Registration No. 36,516  
Attorney of Record  
Customer No. 20,995  
(619) 235-8550